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CONFIRMATION NO. 5954

SERIAL NUMBER 10/696,072	FILING OR 371(c) DATE 10/29/2003 RULE	CLASS 250	GROUP ART UNIT 2881	ATTORNEY DOCKET NO. 03-022
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APPLICANTS

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** CONTINUING DATA *Mark*** FOREIGN APPLICATIONS *Mark***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

** 01/30/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance		
Verified and Acknowledged	Examiner's Signature <i>Mark</i> Initials		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
CANADA	8	11	3

ADDRESS

30058

TITLE

Fluid treatment device

FILING FEE RECEIVED 1060	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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